

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000052891 (5)

1. Corporation Name
BRAUTECH BREWING CO.



Principal Place of Business
10170 NW SOUTH RIVER DRIVE
BAY 11
MEDLEY FL 33178
US

Mailing Address
10170 NW SOUTH RIVER DR
BAY 11
MEDLEY FL 33178-1324
US

3. Date Incorporated or Qualified: 07/03/1995
3a. Date of Last Report: 06/25/1996

4. FEI Number: 65-0674090-0001
APPLIED FOR

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s 199.032, Florida Statutes: Yes No

2. Principal Place of Business

21. State, Apt. #, etc.: same as #1	22. City & State: n/a	23. Zip: n/a	24. Country: n/a	25. State, Apt. #, etc.: same as #1	26. City & State: n/a	27. Zip: n/a	28. Country: n/a	29. State, Apt. #, etc.: same as #1	30. City & State: n/a	31. Zip: n/a	32. Country: n/a
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9. Name and Address of Current Registered Agent
HOAR, PAUL W
2174 SW 88 PLACE
MIAMI FL 33189

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code: FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *W. Paul Hoar* DATE: 1-10-97

12. OFFICERS AND DIRECTORS

TITLE: GM	NAME: HOAR, PAUL W	STREET ADDRESS: 21474 SW 88 PLACE	CITY-ST-ZIP: MIAMI FL	<input type="checkbox"/> DELETE
TITLE: TS	NAME: GONGALES, NOEL	STREET ADDRESS: 15920 SEDGEWICK CIRCLE SOUTH	CITY-ST-ZIP: DAVE FL	<input type="checkbox"/> DELETE
TITLE: D	NAME: ROY, RICHARD	STREET ADDRESS: 3115 HIGHWAY 83	CITY-ST-ZIP: HARTLAND WI	<input type="checkbox"/> DELETE
TITLE:	NAME:	STREET ADDRESS:	CITY-ST-ZIP:	<input type="checkbox"/> DELETE
TITLE:	NAME:	STREET ADDRESS:	CITY-ST-ZIP:	<input type="checkbox"/> DELETE
TITLE:	NAME:	STREET ADDRESS:	CITY-ST-ZIP:	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to do so; that I appear in Block 12 or Block 13 if changed, or on an attachment with an address. I execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE: *W. Paul Hoar* DATE: 1-10-97

CR2E034 (9/96)